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TITLE: Quality Assurance of HIV Prevention Services in Texas

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ISSUE: The Texas Department of Health (TDH) does not directly provide any HIV prevention services. Instead, the TDH contracts out more than \$18 million to CBOs and local health departments of both federal and state resources for health education/risk reduction (HE/RR) and prevention counseling/partner elicitation (PC/PE) services. In the past, efforts to assure the quality of prevention services relied on loose guidance to contractors about expectations, who were then expected to assure the quality of their own services.

SETTING: HIV prevention program settings and HIV prevention program management

PROJECT: In order to strengthen quality assurance of HIV prevention programming, TDH took several steps over the course of the last few years. TDH issued more concrete guidance to programs on standards and best practices in prevention work and has modified and restructured monitoring tools to more directly assess the strength of local quality assurance efforts and directly monitor the quality of services offered to offer supportive feedback on the performance of counselors and outreach workers. Rather than calendar-based scheduling of monitoring visits (e.g., once every quarter), the TDH central office prevention consultants use risk-management indices to direct the frequency of visits to a prevention site, while regional prevention consultants have more constant contact with the contractors. TDH has also begun offering prevention program supervisors with more training on how to monitor and improve the quality of services in their agency. Finally, in an effort to support targeted prevention work, TDH has initiated a new process data collection system that allows contractors to collect, report, and analyze information on the populations they serve and interventions they offer in a uniform but simplified way. This new system allows specific feedback from TDH consultants to programs on their targeting efforts, and allows intervention plans to be reviewed by both the programs and their TDH consultants on an ongoing basis, to be revised when appropriate.

RESULTS: Developing systems that measure specific outcomes or expectations versus evaluating the "process" will direct TDH and contractors in developing more sophisticated Quality Assurance systems and give more leverage to impose sanctions for poor performance.

LESSONS LEARNED: Prevention programs welcome more specific articulation of TDH's expectations and the ability to use standardized data systems to describe the clients they encounter and interventions they offer.

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